								SERIAL	ERIAL NO.				FILING DATE		
MULTIPLE DEPENDENT CLAIM								09 530931							
FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)								APPLICA	NT(S)			ــــــــــــــــــــــــــــــــــــــ			
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* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV. 3-78)

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